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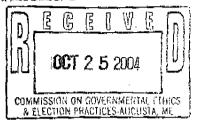
AME

Sent Saturday, Oct-23 of 2:32pm

STATE OF MAINE COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station Office: 242 State Street Augusta, Maine 04333 Tel: (207) 287-4179 Fax: (207) 287-6775 www.maine.gov/ethics

CAMPAIGN FINANCE REPORT OF INDEPENDENT EXPENDITURES 2004 GENERAL ELECTION



A
Name of Person/Committee Making Expenditure(s)
Mailing Address 45 MUVIVE ST- City, Zip Code Augusta, ME 04349 Telephone 620-7060
City, Zip Code Augusta, ME 04349 Telephone 600-7060
Instructions Please see previous page for reporting requirements. Complete notarized affidavit and two attached schedules.
Filing Schedule Independent expenditures for the 2004 general election in excess of \$250 per candidate must be reported to the Commission within 24 hours of making the expenditures, Independent expenditures aggregating in excess of \$100, but not in excess of \$250, must be reported to the Commission on October 12, 2004, October 27, 2004, or December 14, 2004 (whichever occurs first after the expenditure).
Please check: (X) Report of Independent Expenditure over \$250 () October 12, 2004 Report of Independent Expenditure of \$250 or Less () October 27, 2004 Report of Independent Expenditure of \$250 or Less () December 14, 2004 Report of Independent Expenditure of \$250 or Less () Amendment to Earlier Report Dated: () Other (specify):
I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT AND COMPLETE. Signature of PAC or Party Treasurer, or Other Person Making Expenditure(s)

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ETHICS COMMISSION

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STATE OF MAJNE COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station Office: 242 State Street Augusta, Maine 04333

Tel: (207) 287-4179 Fax: (207) 287-6775 Web site: www.maine.gov/ethics

INDEPENDENT EXPENDITURES

AFFIDAVIT

STATE OF VILLE
COUNTY OF Kenrebec
Abigail Holm, being duly swom, says that he/she made each
of the expenditures listed in the attached report independently, and not in cooperation, consultation
or concert with, or at the request or suggestion of, the candidates named in the report or the
authorized committees or agents of the candidates.
(Signature of Affiant)
Sworn to before me, this 23 day of October 2004.

(Notary Public/Attorney at Law)

10/25/2004 10:20

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Page___of___of___(Schedule B-IE-1 only)

Schedule B-IE-1

CANDIDATE(S) SUPPORTED/OPPOSED

Please list all candidates that were the subject of independent expenditures. If more than one candidate was the subject of the expenditure, allocate the expenditure among the candidates.

Office sought by candidate (including district #)	Candidate's Name		Indicate whether expenditure was made in support of or in opposition to the candidate	Amount expended this reporting period for each candidate
Sen 15	Peter r	hills	Support	779.41
Sen 20	Done	Oou	Support	526.96
sensi	Doug	Newman	Support	510.07
sen 24	Julie	0'Brien	Support	1040.36
Ser. 12	500	Bamo	SUPPRIF	438.12

ETHICS COMMISSION

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Page___nf___ (Schedule B-IV-2 only)

Schedule B-IE-2

ITEMIZATION - INDEPENDENT EXPENDITURES

Please indicate the date, payee, purpose and amount of each expenditure. If you are reporting an agreement or obligation to make a future payment, please note that in the margin.

Date of expenditure	Psyce, address, zip code	Purpose of expenditure	Amount
10/22	Creame Princip Surbort	minaling	2629.82
66/01	US Porhl Service 4074	Portrage	670.10
		U	
		.:	7
			(7) 44 (7) 44 (7) 44 (4) 44 (4
	·		Fig.
1. Expenditures this page			3294,92
(Last page only Schedule B-IE-2) 2. Total from attached pages (Schedule B-IE-2)			
•	3. Total expenditures this period		